

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000083845

**FILED**  
**Sep 03, 2014**  
**Secretary of State**

**Entity Name:** TROY MOORE ENTERPRISES, INC.

**Current Principal Place of Business:**

5442 HOLLOW OAK LN  
MILTON, FL 32571

**New Principal Place of Business:**

**Current Mailing Address:**

5442 HOLLOW OAK LN  
MILTON, FL 32571

**New Mailing Address:**

**FEI Number:** 47-0879988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE, TROY  
5442 HOLLOW OAK LN  
MILTON, FL 32571 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** TROY MOORE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** MOORE, TROY  
**Address:** 5442 HOLLOW OAK LN  
**City-St-Zip:** MILTON, FL 32571

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** TROY MOORE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

09/03/2014

\_\_\_\_\_  
Date